

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

Office and Professional Employees International Union - Voice of the Electorate

ADDRESS (number and street)

1660 L STREET, NW

SUITE 801

☐Check if different  
than previously  
reported. (ACC)

Washington

DC

20036

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00007898

3. IS THIS  
REPORT☐NEW  
(N)**OR**☒AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☒July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE-Election**  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post -Election**  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

04

01

2005

through

06

30

2005

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Nancy Wohlforth

Signature of Treasurer

Electronically Filed by Nancy Wohlforth

Date

03

10

2006

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only							
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**FEC FORM 3X**  
(Rev. 02/2003)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Office and Professional Employees International Union - Voice of the Electorate

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	4	0	1	2	0	0	5

To:

M	M	D	D	Y	Y	Y	Y
0	6	3	0	2	0	0	5

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2005</span>		208694.46
(b) Cash on Hand at Beginning of Reporting Period .....	208694.46	
(c) Total Receipts (from Line 19) .....	58217.44	108007.21
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	266911.90	316701.67
7. Total Disbursements (from Line 31) .....	56070.00	90757.50
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	210841.90	225944.17
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

Office and Professional Employees International Union - Voice of the Electorate

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	4	0	1	2	0	0	5

To:

M	M	D	D	Y	Y	Y	Y
0	6	3	0	2	0	0	5

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	34781.00	55732.88
(i) Itemized (use Schedule A) .....	23186.44	51774.33
(ii) Unitemized .....	57967.44	107507.21
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➤	57967.44	107507.21
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ..... ➤	57967.44	107507.21
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	250.00	500.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	58217.44	108007.21
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	58217.44	108007.21

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		0.00	0.00
(i) Federal Share.....			
(ii) Non-Federal Share.....		0.00	0.00
(b) Other Federal Operating Expenditures.....		20320.00	31507.50
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....		20320.00	31507.50
22. Transfers to Affiliated/Other Party Committees.....		0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		13500.00	23500.00
24. Independent Expenditure (use Schedule E) .....		0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....		0.00	0.00
26. Loan Repayments Made.....		0.00	0.00
27. Loans Made.....		0.00	0.00
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....		0.00	0.00
(b) Political Party Committees .....		0.00	0.00
(c) Other Political Committees (such as PACs) .....		0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....		0.00	0.00
29. Other Disbursements.....		22250.00	35750.00
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....		0.00	0.00
(ii) "Levin" Share .....		0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....		0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....		0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..		56070.00	90757.50
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....		56070.00	90757.50

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	57967.44	107507.21
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	57967.44	107507.21
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	20320.00	31507.50
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	20320.00	31507.50

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

Full Name (Last, First, Middle Initial)

**A.** Terrence W Adams

Mailing Address PO Box 208

City State Zip Code  
Waco TX 76703-0208

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Income Life

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 5 / 2 0 0 5

Transaction ID: C000033Q2

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

**B.** John Akers

Mailing Address 17504 Emiline St

City State Zip Code  
Omaha NE 68136-2026

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Income Life

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 5 / 2 0 0 5

Transaction ID: C000096Q2

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**C.** Richard Altig, Jr

Mailing Address 12309 98th Avenue Ct NW

City State Zip Code  
Gig Harbor WA 98329-6941

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Income Life

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3779.22

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 5 / 2 0 0 5

Transaction ID: C000166Q2

Amount of Each Receipt this Period

2490.00

**SUBTOTAL** of Receipts This Page (optional) .....

2910.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

Full Name (Last, First, Middle Initial)

**A.** Vlad Basov

Mailing Address 1062 Pedernales Trl

City State Zip Code  
 Irving TX 75063-9372

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Income Life

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 6 / 1 5 / 2 0 0 5

Transaction ID: C000566Q2

Amount of Each Receipt this Period

900.00

Full Name (Last, First, Middle Initial)

**B.** Yaroslav Bitman

Mailing Address 2 EMERALD TERRACE  
 Suite 1

City State Zip Code  
 SWANSEA IL 62226

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Income Life

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 6 / 1 5 / 2 0 0 5

Transaction ID: C000783Q2

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**C.** Gary Bleier

Mailing Address 917 E Windfield Pl  
 Apt. A

City State Zip Code  
 Appleton WI 54911-1577

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Income Life

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 6 / 1 5 / 2 0 0 5

Transaction ID: C000855Q2

Amount of Each Receipt this Period

300.00

**SUBTOTAL** of Receipts This Page (optional) .....

1500.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 32

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

<b>A.</b> Full Name (Last, First, Middle Initial) Matt Blumert Mailing Address 22909 Davis Mill Rd City Germantown State MD Zip Code 20876-4505 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer American Income Life Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 343.22			Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: C000876Q2 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">150.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	5		2	0	0	5	150.00									
M	M	/	D	D	/	Y	Y	Y	Y																								
0	6		1	5		2	0	0	5																								
150.00																																	
<b>B.</b> Full Name (Last, First, Middle Initial) Ross (Rob) E Boles, Jr. Mailing Address 2375 S Glenn Ln City Salem State IN Zip Code 47167-7596 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer American Income Life Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1700.00			Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: C000893Q2 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">1200.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	5		2	0	0	5	1200.00									
M	M	/	D	D	/	Y	Y	Y	Y																								
0	6		1	5		2	0	0	5																								
1200.00																																	
<b>C.</b> Full Name (Last, First, Middle Initial) David W Brister Mailing Address 2104 Arbor Dr City Shrewsbury State MA Zip Code 01545-6006 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer American Income Life Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1800.00			Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: C001051Q2 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">900.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	5		2	0	0	5	900.00									
M	M	/	D	D	/	Y	Y	Y	Y																								
0	6		1	5		2	0	0	5																								
900.00																																	
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶			<table border="1"> <tr> <td colspan="10">2250.00</td> </tr> </table>	2250.00																													
2250.00																																	
<b>TOTAL</b> This Period (last page this line number only) ..... ▶			<table border="1"> <tr> <td colspan="10"></td> </tr> </table>																														



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

<b>A.</b> Full Name (Last, First, Middle Initial) Tod Brown Mailing Address 590 S Crawford St City Martinsville State IN Zip Code 46151-2318 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer American Income Life Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 5 / 2 0 0 5 <b>Transaction ID:</b> C001145Q2 Amount of Each Receipt this Period 150.00
<b>B.</b> Full Name (Last, First, Middle Initial) David Cohen Mailing Address 140 N Las Palmas Ave City Los Angeles State CA Zip Code 90004-1048 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer American Income Life Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2400.00		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 5 / 2 0 0 5 <b>Transaction ID:</b> C001831Q2 Amount of Each Receipt this Period 1200.00
<b>C.</b> Full Name (Last, First, Middle Initial) TYRONE ALLEN CONARD Mailing Address 14103 COVE LANDING DR #303 City WOODBRIDGE State VA Zip Code 22191 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer American Income Life Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 5 / 2 0 0 5 <b>Transaction ID:</b> C001886Q2 Amount of Each Receipt this Period 300.00
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		1650.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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FOR LINE NUMBER: PAGE 10 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

<b>A.</b> Full Name (Last, First, Middle Initial) Bret R FELS		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 5 / 2 0 0 5
Mailing Address 6415 GREY RIDGE		<b>Transaction ID:</b> C002783Q2
City SAN ANTONIO	State TX	Zip Code 78233
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 120.00
Name of Employer American Income Life	Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Donald Foti		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 5 / 2 0 0 5
Mailing Address 4900 DRY CREEK ROAD		<b>Transaction ID:</b> C003053Q2
City Napa	State CA	Zip Code 94558
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 600.00
Name of Employer American Income Life	Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Steve Foti		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 5 / 2 0 0 5
Mailing Address 1351 Hampton Ct		<b>Transaction ID:</b> C003055Q2
City Discovery Bay	State CA	Zip Code 94514-9291
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 225.00
Name of Employer American Income Life	Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

**SUBTOTAL** of Receipts This Page (optional) .....

945.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 11 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

A. Full Name (Last, First, Middle Initial)

Cindy Furer

Mailing Address 374 E Pelican Ct

City State Zip Code  
 Fresno CA 93720-1254

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income Life

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 1 5 / 2 0 0 5

Transaction ID: C003178Q2

Amount of Each Receipt this Period

900.00

B. Full Name (Last, First, Middle Initial)

Larry Geneser

Mailing Address 13515 S Pebblebrook Ln

City State Zip Code  
 Greenwood MO 64034-8211

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income Life

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

603.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 1 5 / 2 0 0 5

Transaction ID: C003374Q2

Amount of Each Receipt this Period

3.00

C. Full Name (Last, First, Middle Initial)

TRAVIS GENESER

Mailing Address 164 SW ROBIN ROAD

City State Zip Code  
 LEE'S SUMMITT MO 64086

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income Life

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 1 5 / 2 0 0 5

Transaction ID: C003375Q2

Amount of Each Receipt this Period

2000.00

**SUBTOTAL** of Receipts This Page (optional) .....

2903.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

<b>A.</b> Full Name (Last, First, Middle Initial) Eric Giglione Mailing Address 18 Driftwood Ln City State Zip Code Colts Neck NJ 07722-2120 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer American Income Life Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2443.22		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 5 / 2 0 0 5 <b>Transaction ID:</b> C003400Q2 Amount of Each Receipt this Period 1200.00
<b>B.</b> Full Name (Last, First, Middle Initial) Steven Greer Mailing Address PO Box 208 City State Zip Code Waco TX 76703-0208 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer NATIONAL INCOME LIFE Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 5 / 2 0 0 5 <b>Transaction ID:</b> C003680Q2 Amount of Each Receipt this Period 900.00
<b>C.</b> Full Name (Last, First, Middle Initial) John Hancock Mailing Address 4127 Timber Ct City State Zip Code Indianapolis IN 46250-2279 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer American Income Life Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 5 / 2 0 0 5 <b>Transaction ID:</b> C003854Q2 Amount of Each Receipt this Period 150.00

SUBTOTAL of Receipts This Page (optional) .....

2250.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

<b>A.</b> Full Name (Last, First, Middle Initial) Mark Hancock Mailing Address 12546 Walnut Ridge Pl City Fishers State IN Zip Code 46038-1188 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer AMERICAN INCOME LIFE INS. CO. Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1800.00			Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 5 / 2 0 0 5 <b>Transaction ID:</b> C003855Q2 Amount of Each Receipt this Period 900.00
<b>B.</b> Full Name (Last, First, Middle Initial) Victor Hancock Mailing Address 2375 S Glenn Ln City Salem State IN Zip Code 47167-7596 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer American Income Life Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1800.00			Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 5 / 2 0 0 5 <b>Transaction ID:</b> C003858Q2 Amount of Each Receipt this Period 1200.00
<b>C.</b> Full Name (Last, First, Middle Initial) Steve Hartman Mailing Address 21215 N 53rd Ave City Glendale State AZ Zip Code 85308-9145 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer AMERICAN INCOME LIFE INS. Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1500.00			Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 5 / 2 0 0 5 <b>Transaction ID:</b> C003943Q2 Amount of Each Receipt this Period 900.00

**SUBTOTAL** of Receipts This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

Full Name (Last, First, Middle Initial)

**A.** William Heath

Mailing Address 3833 A RUE VOLTAIRE

City State Zip Code  
 INDIANAPOLIS IN 46220

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Income Life

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 1 5 / 2 0 0 5

Transaction ID: C003984Q2

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**B.** Wayne G Hendricks

Mailing Address 11151 W MEINECKI

City State Zip Code  
 WAUWATOSA WI 53226

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Income Life

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 1 5 / 2 0 0 5

Transaction ID: C004024Q2

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**C.** ROBERT T HUGHES

Mailing Address 5040 W 190TH STREET

City State Zip Code  
 COUNTRY CLUB IL 60411

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Income Life

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 1 5 / 2 0 0 5

Transaction ID: C004315Q2

Amount of Each Receipt this Period

300.00

**SUBTOTAL** of Receipts This Page (optional) .....

750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

Full Name (Last, First, Middle Initial)

A. Samuel L James

Mailing Address PO Box 208

City

Waco

State

TX

Zip Code

76703-0208

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income Life

Occupation

Insurance Agent

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 5 / 2 0 0 5

Transaction ID: C004460Q2

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

B. John Jatoft

Mailing Address 277

1777 Oakland Blvd

City

Walnut Creek

State

CA

Zip Code

94596-4095

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income Life

Occupation

Insurance Agent

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

1643.22

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 5 / 2 0 0 5

Transaction ID: C004485Q2

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

C. Allan Jennings

Mailing Address 346 Dimaggio Dr

City

Tooele

State

UT

Zip Code

84074-9296

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income Life

Occupation

Insurance Agent

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

624.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 5 / 2 0 0 5

Transaction ID: C004516Q2

Amount of Each Receipt this Period

24.00

SUBTOTAL of Receipts This Page (optional) .....

744.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

Full Name (Last, First, Middle Initial)

**A.** William Jennings

Mailing Address 4329 S Alton St

City State Zip Code  
 Greenwood Village CO 80111-1203

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Income Life

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 1 5 / 2 0 0 5

Transaction ID: C004519Q2

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

**B.** Rusty B Jewell

Mailing Address PO Box 208

City State Zip Code  
 Waco TX 76703

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Income Life

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 1 5 / 2 0 0 5

Transaction ID: C004532Q2

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

**C.** Theresa L. Kandt

Mailing Address 66755 Powell Rd

City State Zip Code  
 Washington MI 48095

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
LOCAL 42

Occupation  
Sec-Treas.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 4 / 1 5 / 2 0 0 5

Transaction ID: C001870Q4

Amount of Each Receipt this Period

24.00

**SUBTOTAL** of Receipts This Page (optional) .....

1224.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

Full Name (Last, First, Middle Initial)

**A.** Theresa L. Kandt

Mailing Address 66755 Powell Rd

City State Zip Code  
Washington MI 48095

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
LOCAL 42

Occupation  
Sec-Treas.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 9 / 2 0 0 5

Transaction ID: C004743Q2

Amount of Each Receipt this Period

24.00

Full Name (Last, First, Middle Initial)

**B.** Theresa L. Kandt

Mailing Address 66755 Powell Rd

City State Zip Code  
Washington MI 48095

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
LOCAL 42

Occupation  
Sec-Treas.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 3 / 2 0 0 5

Transaction ID: C004741Q2

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**C.** Adam Kiss

Mailing Address 89 HIGHLAND AVE

City State Zip Code  
EASTCHESTER NY 10709

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
National Income Life

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 5 / 2 0 0 5

Transaction ID: C004894Q2

Amount of Each Receipt this Period

150.00

**SUBTOTAL** of Receipts This Page (optional) .....

204.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

Full Name (Last, First, Middle Initial)

**A.** Christopher Lafond

Mailing Address 8030 Sherwood Dr

City State Zip Code  
 Presto PA 15142-1078

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Income Life

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 1 5 / 2 0 0 5

Transaction ID: C005066Q2

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

**B.** Joe Manone

Mailing Address N89 W15883 Main St

City State Zip Code  
 Menomonee Falls WI 53051-2938

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Income Life

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 1 5 / 2 0 0 5

Transaction ID: C005637Q2

Amount of Each Receipt this Period

900.00

Full Name (Last, First, Middle Initial)

**C.** Rick Mansfield

Mailing Address 81 Austin St

City State Zip Code  
 Portland ME 04103-4514

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AMERICAN INCOME LIFE INS.  
CO

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 1 5 / 2 0 0 5

Transaction ID: C005640Q2

Amount of Each Receipt this Period

300.00

**SUBTOTAL** of Receipts This Page (optional) .....

1800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

Full Name (Last, First, Middle Initial)

**A.** John McCreary

Mailing Address 8060 N Augusta St

City State Zip Code  
 Fresno CA 93720-2031

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Income Life

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 6 / 1 5 / 2 0 0 5

Transaction ID: C005918Q2

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**B.** Jason A Mollo

Mailing Address PO Box 208

City State Zip Code  
 Waco TX 76703-0208

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Income Life

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 6 / 1 5 / 2 0 0 5

Transaction ID: C006228Q2

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**C.** Maxine V Moody

Mailing Address PO Box 208

City State Zip Code  
 Waco TX 76703-0208

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Income Life

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 6 / 1 5 / 2 0 0 5

Transaction ID: C006261Q2

Amount of Each Receipt this Period

150.00

**SUBTOTAL** of Receipts This Page (optional) .....

450.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

<b>A.</b> Full Name (Last, First, Middle Initial) Marc Morton Mailing Address 2476 Powell Ave City Columbus State OH Zip Code 43209-1749 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer American Income Life Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1600.00		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 5 / 2 0 0 5 <b>Transaction ID:</b> C006359Q2 Amount of Each Receipt this Period 1200.00
<b>B.</b> Full Name (Last, First, Middle Initial) Eric J Neal Mailing Address 256 BRUSH TRAIL BEND City CIBOLO State TX Zip Code 78108 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer American Income Life Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1360.00		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 5 / 2 0 0 5 <b>Transaction ID:</b> C006483Q2 Amount of Each Receipt this Period 900.00
<b>C.</b> Full Name (Last, First, Middle Initial) Nicholas Nitkowski Mailing Address 2156 42nd St Apt 210 City Kenner State LA Zip Code 70065-2297 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer American Income Life Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 5 / 2 0 0 5 <b>Transaction ID:</b> C006557Q2 Amount of Each Receipt this Period 300.00

**SUBTOTAL** of Receipts This Page (optional) .....

2400.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 32

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

Full Name (Last, First, Middle Initial)

**A.** DURHON RENAH R OLDHAM

Mailing Address 1477 CHIGWELL LNN

City	State	Zip Code
WEBSTER	NY	14580

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income LifeOccupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2246.22

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	5	/	2	0	0	5

Transaction ID: C006662Q2

Amount of Each Receipt this Period

3.00

Full Name (Last, First, Middle Initial)

**B.** DURHON RENAH R OLDHAM

Mailing Address 1477 CHIGWELL LNN

City	State	Zip Code
WEBSTER	NY	14580

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income LifeOccupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2246.22

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	5	/	2	0	0	5

Transaction ID: C006661Q2

Amount of Each Receipt this Period

1200.00

Full Name (Last, First, Middle Initial)

**C.** ROBERT OLSON, Jr

Mailing Address 26561 W HIGHLAND DRIVE

City	State	Zip Code
CHANNAHON	IL	60410

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income LifeOccupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	5	/	2	0	0	5

Transaction ID: C006677Q2

Amount of Each Receipt this Period

1200.00

SUBTOTAL of Receipts This Page (optional) .....

2403.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

<b>A.</b> Full Name (Last, First, Middle Initial) Gleb Ostrovsky Mailing Address 110 GREENRIDGE DRIVE City MADISON State MS Zip Code 39110 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer American Income Life Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 5 / 2 0 0 5 <b>Transaction ID:</b> C006732Q2 Amount of Each Receipt this Period 300.00
<b>B.</b> Full Name (Last, First, Middle Initial) Paul D Rumbuc Mailing Address 5617 WOODED LAKE DRIVE City Louisville State KY Zip Code 40299 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer American Income Life Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1600.00		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 5 / 2 0 0 5 <b>Transaction ID:</b> C008014Q2 Amount of Each Receipt this Period 1200.00
<b>C.</b> Full Name (Last, First, Middle Initial) Jonathan Saluk Mailing Address PO Box 208 City Waco State TX Zip Code 76703-0208 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer NATIONAL INCOME LIFE Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 5 / 2 0 0 5 <b>Transaction ID:</b> C008065Q2 Amount of Each Receipt this Period 150.00
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		1650.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

<b>A.</b> Full Name (Last, First, Middle Initial) patrick V Shehan Mailing Address 2909 SE Bingham Dr City State Zip Code Lees Summit MO 64063-2477 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer American Income Life Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 850.00			Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 5 / 2 0 0 5 <b>Transaction ID:</b> C008358Q2 Amount of Each Receipt this Period 600.00
<b>B.</b> Full Name (Last, First, Middle Initial) James Surace Mailing Address PO Box 33160 City State Zip Code North Royalton OH 44133-0160 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer American Income Life Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2496.00			Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 5 / 2 0 0 5 <b>Transaction ID:</b> C008856Q2 Amount of Each Receipt this Period 1248.00
<b>C.</b> Full Name (Last, First, Middle Initial) Leslie Taylor Mailing Address 1125 Vicksburg Dr City State Zip Code Festus MO 63028-3479 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer AMERICAN INCOME Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 800.00			Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 5 / 2 0 0 5 <b>Transaction ID:</b> C008960Q2 Amount of Each Receipt this Period 600.00

**SUBTOTAL** of Receipts This Page (optional) .....

2448.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

Full Name (Last, First, Middle Initial)

**A.** Ronald Vanwoesik

Mailing Address 1813 Glenville Dr

City State Zip Code  
 Allen TX 75013-3066

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Income Life

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 1 5 / 2 0 0 5

Transaction ID: C009355Q2

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**B.** Gary Williams

Mailing Address 903 Murfreesboro St

City State Zip Code  
 Murfreesboro TN 37127-4765

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Income Life

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 1 5 / 2 0 0 5

Transaction ID: C009809Q2

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**C.** Thomas Williams

Mailing Address 10246 SW 22nd Pl

City State Zip Code  
 Davie FL 33324-7613

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Income Life

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 1 5 / 2 0 0 5

Transaction ID: C009855Q2

Amount of Each Receipt this Period

1200.00

**SUBTOTAL** of Receipts This Page (optional) .....

1800.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

**A.** Full Name (Last, First, Middle Initial)  
JAMES WITTENBACH

Mailing Address 1043 RN WHITFIELD STREET

City State Zip Code  
FLORENCE MS 39073

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income Life

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 5 / 2 0 0 5

Transaction ID: C009966Q2

Amount of Each Receipt this Period

300.00

**B.** Full Name (Last, First, Middle Initial)

David Zophin

Mailing Address 277  
6300 Roundrock Trl

City State Zip Code  
Plano TX 75023-3425

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income Life

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2200.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 5 / 2 0 0 5

Transaction ID: C010105Q2

Amount of Each Receipt this Period

1200.00

**SUBTOTAL** of Receipts This Page (optional) .....

1500.00

**TOTAL** This Period (last page this line number only) .....

34781.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 32

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☒ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

**A.** Full Name (Last, First, Middle Initial)  
The Committee to Elect James M. Murphy

Mailing Address 17 Ruggiano Circle

City State Zip Code  
Weymouth MA 02188

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2005

☐ Primary ☐ General

☒ Other (specify) ▼

O

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 9 / 2 0 0 5

Transaction ID: C45439

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

250.00

**TOTAL** This Period (last page this line number only) .....

250.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 27 / 32

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

Full Name (Last, First, Middle Initial)

## **A. New Jersey State AFL-CIO**

Mailing Address Borgata Hotel Casino and Spa

City Atlantic City State NJ Zip Code 08401

Purpose of Disbursement  
June 14-15, 2005

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2005  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District: O

Transaction ID: D44

Date of Disbursement

04 / 21 / 2005

Amount of Each Disbursement this Period

10000.00

Full Name (Last, First, Middle Initial)

## **B. Secretary of State**

Mailing Address 1500 11th Street  
Room 495

City Sacramento State CA Zip Code 95814

Purpose of Disbursement  
Late Filing Fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2005  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District: O

Transaction ID: D43

Date of Disbursement

06 / 07 / 2005

Amount of Each Disbursement this Period

320.00

Full Name (Last, First, Middle Initial)

## **C. Voices for Working Families**

Mailing Address 888 16th Street, NW, Suite 400

City Washington State DC Zip Code 20006

Purpose of Disbursement  
Contribution

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2005  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District: O

Transaction ID: D42

Date of Disbursement

04 / 21 / 2005

Amount of Each Disbursement this Period

10000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

20320.00

**TOTAL** This Period (last page this line number only) .....

20320.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 28 / 32

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

Full Name (Last, First, Middle Initial)

**A. BRIAN BAIRD FOR CONGRESS**

Mailing Address PO Box 5016

City  
Vancouver

State  
WA

Zip Code  
98668

Purpose of Disbursement  
3rd District - WA

Candidate Name  
Brian Baird

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2005  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: WA District: 03

Transaction ID: O000001Q4

Date of Disbursement

04 / 14 / 2005

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Committee for Democratic Majority**

Mailing Address 301 4th Street, NE  
Suite 202

City  
Washington

State  
DC

Zip Code  
20002

Purpose of Disbursement  
Annual Labor Dinner

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2005  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: O000012Q2

Date of Disbursement

06 / 17 / 2005

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Kaine for Governor**

Mailing Address 6010 A North Crestwood Avenue

City  
Richmond

State  
VA

Zip Code  
23230

Purpose of Disbursement  
Governor in VA

Candidate Name  
Tim Kaine

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2005  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: VA District: F

Transaction ID: O000013Q2

Date of Disbursement

06 / 18 / 2005

Amount of Each Disbursement this Period

5000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

7000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

Full Name (Last, First, Middle Initial)

**A. STEVE ROTHMAN FOR NEW JERSEY INC.**

Mailing Address P.O. Box 714

City Hackensack State NJ Zip Code 07602

Purpose of Disbursement  
Congress 9th Dist. - NJ

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2005  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NJ District: 09

Transaction ID: O000014Q2

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. VanHollen**

Mailing Address VanHollen for Congress  
10605 Concord Street

City Kensington State MD Zip Code 20895

Purpose of Disbursement  
Congress

Candidate Name  
Vanhollen

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2005  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MD District: 08

Transaction ID: O000008Q2

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. WALL FOR CONGRESS**

Mailing Address PO BOX 1145

City GREEN BAY State WI Zip Code 54305

Purpose of Disbursement  
8th District - WI

Candidate Name  
Jamie Wall

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2005  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: WI District: 08

Transaction ID: O000011Q2

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6500.00

**TOTAL** This Period (last page this line number only) .....

13500.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 30 / 32

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

Full Name (Last, First, Middle Initial)

**A. BOB FILNER FOR CONGRESS**

Mailing Address P.O. Box 127868

City  
San Diego

State  
CA

Zip Code  
92112

Purpose of Disbursement  
51st Congressional District in CA

Candidate Name  
Bob Filner

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2005  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 51

Transaction ID: O000009Q2

Date of Disbursement

/   /

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

**B. Brad Henry for Govenor**

Mailing Address 4100 N. Lincoln Boulevard

City  
Oklahoma City

State  
OK

Zip Code  
73105

Purpose of Disbursement  
Governor - OK

Candidate Name  
Brad Henry

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2005  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: OK District:

Transaction ID: O000005Q2

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. Committee to Elect Brenda Jones**

Mailing Address PO Box 21146

City  
Detroit

State  
MI

Zip Code  
48221

Purpose of Disbursement  
MI City Council - Wayne County

Candidate Name  
Brenda Jones

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2005  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: O000004Q4

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

9500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 31 / 32

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

Full Name (Last, First, Middle Initial)

## **A. Committee to Elect Candy Mero Carlson**

Mailing Address 42 Benedict Road

City Worcester State MA Zip Code 01609

Purpose of Disbursement  
City Council - City of Worcester MA

Candidate Name  
Candy M Carlson

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2005  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MA District:

Transaction ID: O000002Q4

Date of Disbursement

04 / 14 / 2005

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

## **B. Friends of Cruz Bustamante**

Mailing Address 1700 L Street

City Sacramento State CA Zip Code 95814

Purpose of Disbursement  
Retirement Committee

Candidate Name  
Cruz Bustamante

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2005  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District:

Transaction ID: O000003Q4

Date of Disbursement

04 / 21 / 2005

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

## **C. NEW MEXICANS FOR BILL RICHARDSON**

Mailing Address One Mansion Road

City Santa Fe State NM Zip Code 87501

Purpose of Disbursement  
Governor - NM

Candidate Name  
Bill Richardson

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2005  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NM District:

Transaction ID: O000010Q2

Date of Disbursement

06 / 01 / 2005

Amount of Each Disbursement this Period

5000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

10250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 32 / 32

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Office and Professional Employees International Union - Voice of the Electorate

Full Name (Last, First, Middle Initial)

**A.** The Klehs Committee 2006

Mailing Address PO Box 1026

City  
San Leandro

State  
CA

Zip Code  
94577

Purpose of Disbursement  
Senate Race

Candidate Name  
John Klehs

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2005  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CA

District:

Transaction ID: O000015Q2

Date of Disbursement

MM / DD / YYYY  
06 / 27 / 2005

Amount of Each Disbursement this Period

2500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2500.00

**TOTAL** This Period (last page this line number only) .....

22250.00